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Substitute for form 1449A/PTO				<b>Complete If Known</b> <b>Application Number</b> 10/631,165 <b>Filing Date</b> July 31, 2003 <b>First Named Inventor</b> Kimberly D. Seaman <b>Art Unit</b> 3692 <b>Examiner Name</b> Clement B. Graham	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(use as many sheets as necessary)</i>				<b>Attorney Docket Number</b> 020673	
Sheet	1	of	2		

[illegible][illegible]

Examiner Signature	/Clement Graham/	Date Considered	09/30/2009
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<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /C.G./